

In-Home Medicaid/State Services Rate Study

August 3rd, 2022

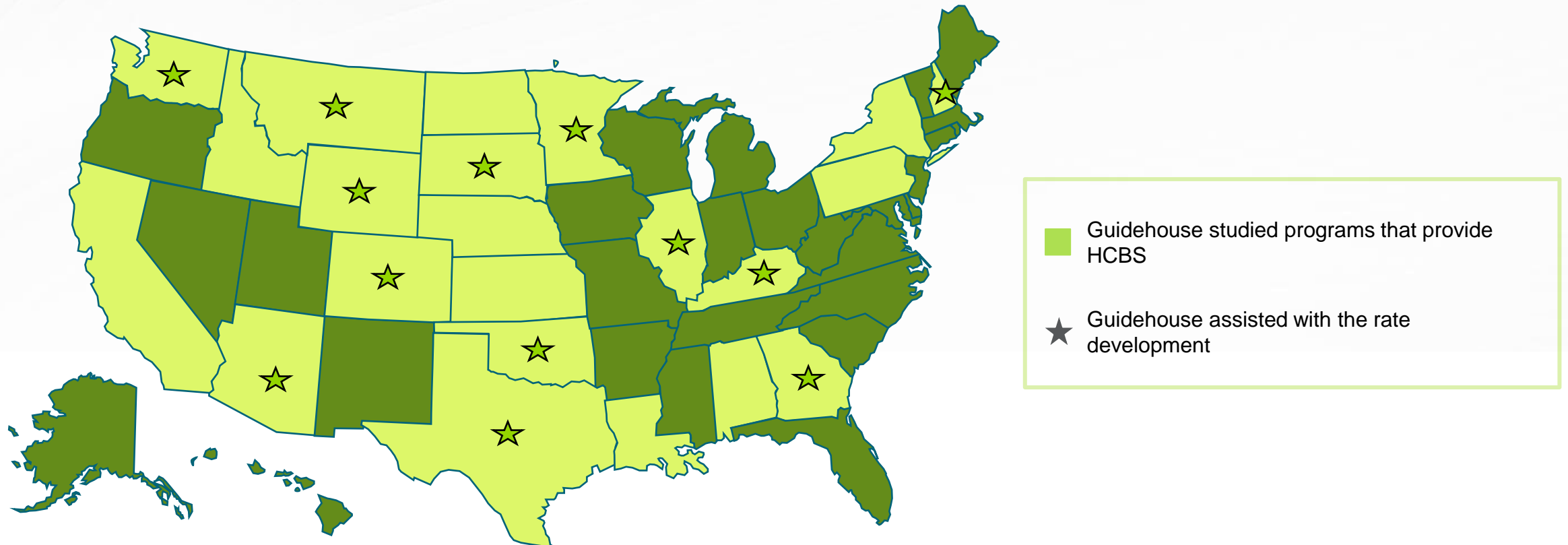


Agenda

- Welcome and Introductions
- Operating Guidelines and Goals
- Scope of Project
- Cost and Wage Survey
- Workgroup Timelines and Next Steps
- Upcoming Advisory Workgroups
- Questions and Answers

Welcome and Introductions

Guidehouse: Experience with Rate Studies including Home and Community Based Services (HCBS)



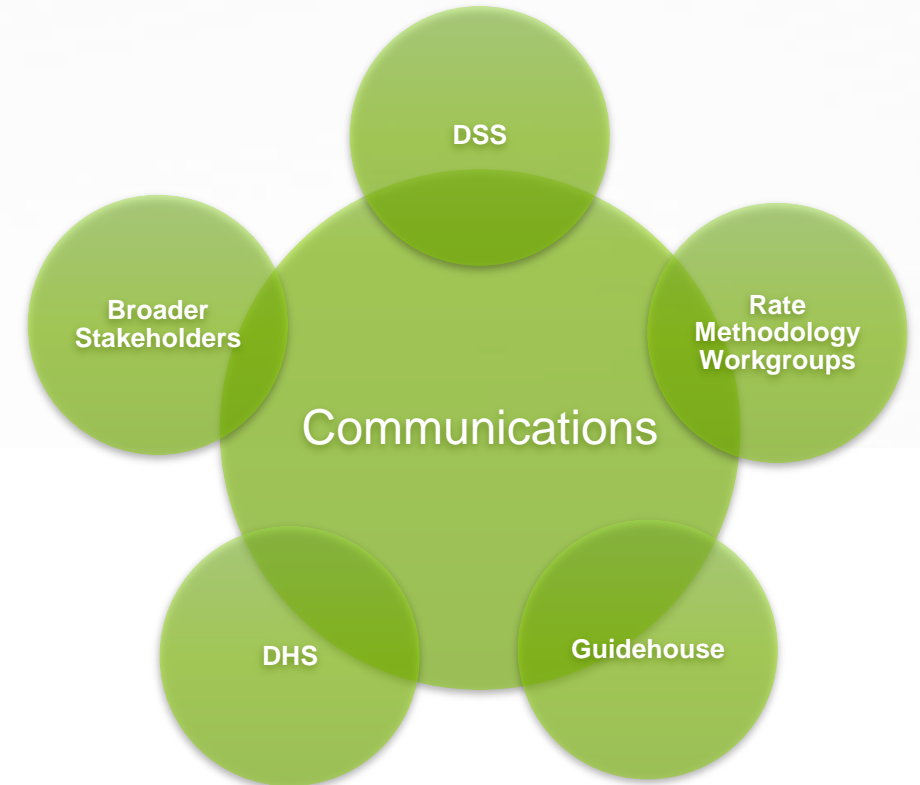
Roles, Collaborative Needs and Expectations

- Overall members within advisory workgroup: 14
- Membership representatives of individual providers and provider associations directly impacted by rate changes
- Members have a strong understanding of provider finances, reporting capabilities, and service costs
- Determine the common principles/parameters that will apply to the rate setting methodology
- Provider representatives will facilitate the timely and accurate submission of cost surveys and additional information as requested
- Establish a mechanism for communicating workgroup actions with individual provider organizations, provider associations, legislators and other stakeholders
- Cost, wage and other rate analysis components could demonstrate need for potential changes – both positive and negative – to service rates and level of reimbursement to providers

Communication Goals and Objectives

Communication efforts between all stakeholder groups are intended to:

- Involve diverse perspectives and meaningfully include stakeholders in the study process
- Advance project goals and objectives, removing communication barriers and bottlenecks, wherever possible
- Offer transparency on methodology and findings throughout the study
- Support to Guidehouse to independently consider all perspectives throughout the rate methodology study process.
- Adhere to CMS requirements for rate development and stakeholder engagement pursuant to any future changes in Medicaid programs / policies (e.g., required public comment period, etc.)



Scope of Project

In-Home Medicaid/State Services

Purpose of Rate Study

- Update rates to account for changes in costs and wages for the staff that provides these services
- Understand billable vs non-billable time components of rate models
- Explore recommendations for competitive benefit assumptions, including health insurance for staff
- Key Deliverables:
 - Peer State Comparisons
 - Rate Models
 - Fiscal Impact
 - Final Report

Scope of Services

Personal Care

Homemaker

Adult Companion

Chore

Respite

Nursing

Guidehouse Approach to Rate-Building Across Programs / Services

Employs assumptions of:

- Wages
- Types of employees
- Staffing ratios
- Employee benefits
- Other provider costs



Recognizes the costs of services with service-specific variations

Analysis requires multiple components

Independent Model Approach – An approach using state-specific data sources to develop the estimates for each cost component for each service.

Consideration of participant's specific needs (acuity level, dependent on available assessment data)



Assumptions can be derived from state, national or industry standard data

Common Sources of Data for Rate Studies

To build independent rates for each program consistent with the concept on the previous slide, we will use a variety of sources to inform our assumptions:

- Cost Reports
- Provider cost and wage survey data from South Dakota providers.
- *Bureau of Labor Statistics* (BLS) wage and employee-related expenses (ERE) data specific to Montana.
- *Medical Expenditure Panel Survey – Insurance Component* (MEPS-IC) state-specific data regarding health insurance (employer offer, employee take-up, premium and deductible levels).
- Inflation factors, both historic and forward-looking.
- *MMIS* Claims data.
- Other state and national benchmarks.

Cost and Wage Survey

Provider Cost and Wage Survey

Guidehouse will develop and administer a Provider Cost and Wage Survey to collect provider information across multiple services. Cost survey and cost report data will serve as the basis for rate studies.

Purpose of Cost and Wage Survey

- Measure inflationary impact on direct care worker wages
- Determine cost basis for evaluating rate equity for services
- Gather needed data to understand billable vs non-billable time per service
- Identify staff mileage differences for each type of service
- Investigate differences in costs among frontier/rural/suburban areas
- Solicit general feedback from providers to explore service delivery improvements and efficiencies

Key Deliverables

- Comprehensive Provider Cost and Wage Survey (“Full” Survey)
- Survey Instructions
- Provider Communications and Support
- Cost Analysis
- Provider Training

Proposed Survey Design and Topics

Survey Topics	Survey Data Points and Metrics	Example Rate Study Data Point(s)
A – Organizational Information	Provider identification, contact information, and organizational details	-
B – Service Areas	Geographic areas where programs are operated	Regional-based rates
C – Services	Services delivered	-
D – Wages	Job types, staff types, hourly wages, supplemental pay, overtime, and training time	Baseline wages for rate build-up, primary job types per service
E – Service Delivery and Staffing Patterns	Billable vs. Non-Billable time, and supervisor and staffing patterns	Productivity adjustment, staffing ratio, training assumptions
F – Provider Benefits	Benefits that organizations offer full-time and part-time employees who deliver services – health, vision and dental insurance, retirement, unemployment benefits and workers’ compensation, holiday, sick time, and paid time off	Benefits package or Employee Related Expenses (ERE)
G – Additional Information	Clarifying comments in addition to the information covered in other worksheets or sections	-

A – Organizational Information

Worksheet A: Organization Information		
Instructions: Enter information about your provider organization and the contact details for the person who is primarily responsible for completing the provider survey. Please input "N/A" in the yellow cell for questions that are not applicable or if information is not available. -Section 1 (Questions 1-7): Enter general identification information about the provider organization. -Section 2 (Questions 8-11): Enter contact information for the individual responsible for completing the Provider Survey. -Section 3 (Questions 12-14): Enter operational information about the provider organization.		
Time Period for Data Requested: Point in time snapshot of Q2 CY2022 (April-June 2022)		
1. PROVIDER IDENTIFICATION OF PRIMARY OFFICE LOCATION		
1	Provider Organization Name	
2	Are you owned by a larger organization or umbrella company? (Note: Question relates to ownership and not management of services.)	
3	If the answer to question 2 is "Yes", what is the name of that organization? (Note: Mark "N/A" if not applicable.)	
4	Provider ID or Medicaid ID	
5	National Provider Identifier (NPI)	
6	City	
7	County	
2. CONTACT INFORMATION		
8	Contact name	
9	Title	
10	Phone number	
11	Email address	
3. ORGANIZATIONAL DETAILS (enter number or select response from dropdown boxes)		
12	Where do you provide most of your services (rural/urban/suburban)?	
13	Do you serve in South Dakota Tribal areas/jurisdictions? (Note: Tribal areas are defined as geographic areas; this question is not asking about serving participants of Tribal backgrounds.)	
14	Number of unduplicated active In-Home Service Medicaid/State funded members in Q2 CY2022 (enter number)	

For Discussion:

- Can providers report data for Q2 CY2022?
- Feedback on common provider identification number.

B – Service Areas

Worksheet B: Service Area										
Instructions: -Columns 1-8: Identify the counties where in-home services are currently provided to individuals by your organization by marking the box with an "X". If your organization does not provide services in a listed county, please leave the cell blank . -Column 9: Indicate whether service is provided in the entire county ('Entire') or only parts of the county ('Partial'). Time Period for Data Requested: <i>Data reported should be based on current operations</i>										
Question	County	1	2	3	4	5	6	7	8	9
		Services (Select counties where services are delivered)								County Coverage
		Homemaker	Personal Care	Nursing	Adult Companion	Respite	Chore	Client Transportation (not an exclusive service)	Staff Transportation (not an exclusive service)	
1	Aurora									
2	Beadle									
3	Bennett									
4	Bon Homme									
5	Brookings									
6	Brown									
7	Brule									
8	Buffalo									
9	Butte									
10	Campbell									
11	Charles Mix									

C - Services

Worksheet C: Services									
Instructions: Identify in-home services provided to individuals for each direct care staff ("staff") and direct care supervisor ("supervisor") type by marking the box with an "X". If a staff or supervisor type does not cover certain services, or if your organization does not employ a staff or supervisor type, please leave the cell blank.									
Time Period for Data Requested: Q2 CY2022 (April-June 2022)									
Line	Staff Description	1	2	3	4	5	6	7	8
		Services (Select applicable services)						Transportation (Indicate if transportation is included in service delivery)	
		Homemaker	Personal Care	Nursing	Adult Companion	Respite	Chore	Client Transportation (not billed separately)	Staff Transportation (not billed separately)
	Example:	X		X		X	X		X
1	Companion Provider								
2	Direct Service Professional								
3	Service Coordinator/Home Care Coordinator								
4	Home Health Aide								
5	Licensed Nurse Practitioner (NP)								
6	Licensed Practical Nurse (LPN)								
7	Certified Nursing Assistants								
8	Occupational Therapist								
9	Occupational Therapist Assistant								
10	Personal Care Aide								
11	Physical Therapist								
12	Physical Therapist Assistant								
13	Registered Nurse (RN)								
14	Respite Provider								
15	Other Staff 1 (Specify)								
16	Other Staff 2 (Specify)								
17	Other Staff 3 (Specify)								
	Supervisor Description								
18	Client Benefits Manager								
19	Clinical Coordinator								
20	Home Care Aide Supervisor/Direct Support Supervisor								
21	Shift and Unit Supervisor								
22	Other Supervisors (Specify)								

D - Wages

For Discussion:

- Are there other staff who deliver/monitor services?

- Are there any job titles that should be removed?

Line	Staff Description
1	Companion Provider
2	Direct Service Professional
3	Service Coordinator/Home Care Coordinator
4	Home Health Aide
5	Licensed Nurse Practitioner (NP)
6	Licensed Practical Nurse (LPN)
7	Certified Nursing Assistants
8	Occupational Therapist
9	Occupational Therapist Assistant
10	Personal Care Aide
11	Physical Therapist
12	Physical Therapist Assistant
13	Registered Nurse (RN)
14	Respite Provider
15	Other Staff 1 (Specify)
16	Other Staff 2 (Specify)
17	Other Staff 3 (Specify)
Supervisor Description	
18	Client Benefits Manager
19	Clinical Coordinator
20	Home Care Aide Supervisor/Direct Support Supervisor
21	Shift and Unit Supervisor
22	Other Supervisors (Specify)

D – Wages (cont'd)

Columns 1-14: Q2 CY2022 (April-June 2022);

Columns 15: SFY2022 (July 1, 2021 - June 30, 2022) or CY2021 (January 2021 - December 2021)

Line	Staff Description	1	2	3	4	5	6
		Baseline Hourly Wage					Independent Contractor Hourly Rate
		Average	Lowest	Highest	Staff or Supervisor Average Hourly Wage Subjected to Increase on July 1, 2022	Percentage Increase in Staff/Supervisor Average Hourly Wage on July 1, 2022	Average
1	Companion Provider						
2	Direct Service Professional						

For Discussion:

- Can providers report Q2 CY2022 wage data?
- Are questions 4 and 5 clear to help understand wage changes after the quarter end?

D – Wages (cont'd)

Columns 1-14: Q2 CY2022 (April-June 2022);

Columns 15: SFY2022 (July 1, 2021 - June 30, 2022) or CY2021 (January 2021 - December 2021)

Line	Staff Description	7	8	9	10	11
		Total Number of FTE Positions	Total Regular Hours Paid	Supplemental Pay Hours		Total Hours Paid (Autopopulated: Column 8 + Column 9 + Column 10)
				Total Overtime Hours Paid	Total Other Supplemental Pay Hours (e.g., premium, shift differentials, nonproduction bonuses)	
1	Companion Provider					0.00
2	Direct Service Professional					0.00

D – Wages (cont'd)

Columns 1-14: Q2 CY2022 (April-June 2022);

Columns 15: SFY2022 (July 1, 2021 - June 30, 2022) or CY2021 (January 2021 - December 2021)

Line	Staff Description	12	13	14	15
		Total Regular Wages Paid	Supplemental Pay		Staff Training (Annual)
			Total Overtime Pay	Total Other Supplemental Pay (e.g., premium, shift differentials, nonproduction bonuses)	Average Number of Annual Training Hours for Staff/Supervisor
1	Companion Provider				
2	Direct Service Professional				

E – Service Delivery and Staffing Patterns

1. PRODUCTIVITY		Example	Services					
			Homemaker	Personal Care	Nursing	Adult Companion	Respite	Chore
1	Client-facing services	70%						
2	Recordkeeping and documentation for services	10%						
3	Recordkeeping and documentation for activities outside of services (e.g., travel planning, time keeping, etc.)	10%						
4	Participating in scheduled care planning meetings with other professionals, interdisciplinary team members, or collaterals	3%						
5	Travel time to/from and between client residences/locations	5%						
6	Employer administrative or training activities (e.g., staff meetings, program coordination/development, etc.)	2%						
7	Other activities	0%						
8	Autopopulated: Total percentage	100%	0%	0%	0%	0%	0%	0%
9	Autopopulated: Has all time been allocated? (Total in Line 8 should equal sum of Lines 1-7)	Yes	No	No	No	No	No	No

E – Service Delivery and Staffing Patterns (cont'd)

			Services					
			Homemaker	Personal Care	Nursing	Adult Companion	Respite	Chore
2. STAFFING PATTERNS (STAFF TO PARTICIPANT RATIO)								
10	How many individuals, on average, are typically served by one staff or practitioner at a single point in time?	5						
3. SUPERVISOR SPAN OF CONTROL (STAFF TO SUPERVISOR RATIO)								
11	How many staff or practitioners on average are typically supervised by one supervisor?	10						
12	How many hours per week do supervisors spend supervising staff?	2						
4. TRANSPORTATION AND SERVICE TRIP INFORMATION								
13	Average number of trips per day for each service	10						
14	Average minutes per trip per day for each service	30						
15	Average miles per trip per day for each service	40						

F – Provider Benefits

Q2 CY2022 (April-June 2022)

I. Staffing and Health, Vision, & Dental Insurance	
#	Questions
1	How many employees who provide direct services to clients does your organization currently employ?
2	Are direct service staff eligible to receive health insurance through your organization?
3	How many direct service staff are currently eligible for health insurance from your organization?
4	Does your organization contribute towards health insurance premiums?
5	How many direct service staff currently receive individual coverage health insurance from your organization?
6	On average, how much does a typical employee with individual coverage contribute towards his/her own monthly premium?
7	On average, how much does your organization (the employer) contribute towards the monthly plan premium of one typical employee with individual coverage? If your organization self-insures any portion of the health insurance, report the premium equivalent of self-insured costs plus any other premiums paid (e.g. stop-loss premiums, ACO fees).
8	On average, how much is the total monthly premium for a typical employee with individual coverage? <i>(Note: this number should equal the sum of the responses to Questions 6 and 7)</i>
9	What is the average annual deductible for the health insurance offered for individual coverage?
10	Are direct service staff eligible to receive vision insurance through your organization?
11	How many direct service staff currently receive vision insurance from your organization?
12	What was your organization's total contribution to vision insurance costs for direct service staff last year?
13	Are direct service staff eligible to receive dental insurance through your organization?
14	How many direct service staff currently receive dental insurance from your organization?
15	What was your organization's total contribution to dental insurance costs for direct service staff last year?

For Discussion:

- Full-time employees work 30 or more hours a week and part-time employees work less than 30 hours a week.

-Do provider organizations have a different definition for full-time work and how it applies to employees' eligibility for benefits? For example, changes in benefit eligibility in response to evolving labor market.

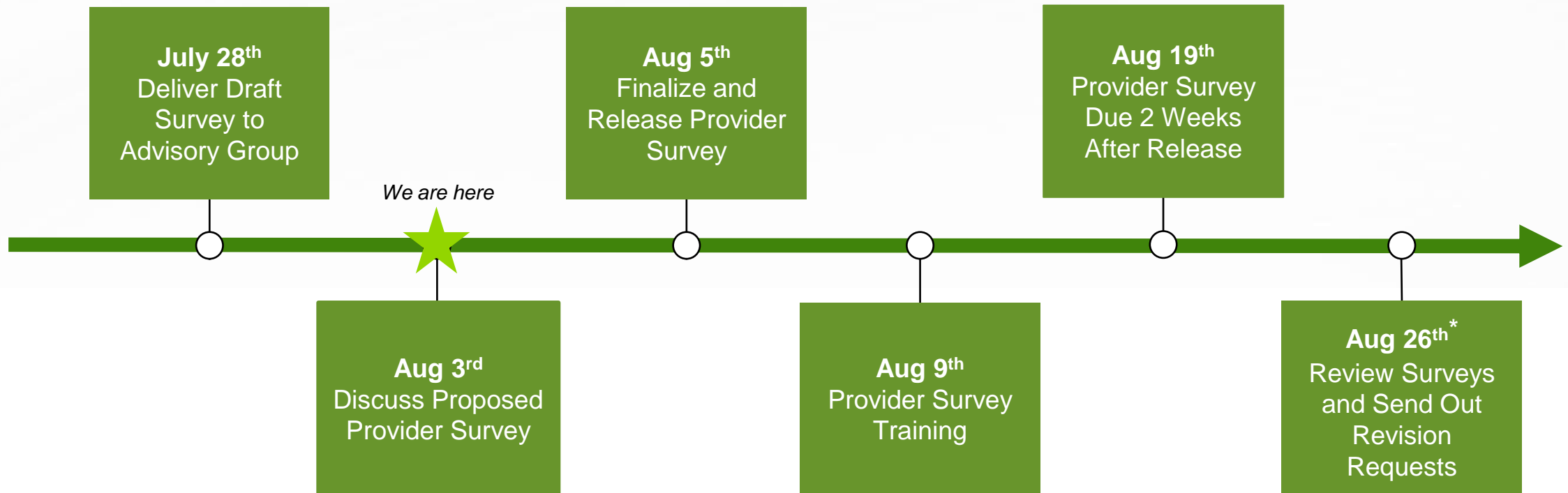
F – Provider Benefits (cont.)

II. Retirement	
16	Does your organization contribute to a 401k, 403b or other retirement plan for your direct service staff?
17	How many direct service staff currently receive retirement contributions from your organization?
18	What is your organization's average retirement contribution for participating direct service staff as a percent of wages?
III. Other Benefits	
19	Does your organization contribute to any other benefits for staff? <i>(please specify)</i> (Specify
20	How many direct service staff currently receive these benefits from your organization?
21	What was your organization's cost for providing these benefits?
IV. Unemployment Insurance and Workers' Compensation	
22	If your organization makes unemployment insurance payments based on a percentage of wages, what is your agency's state unemployment insurance tax rate?
23	What is your average workers' compensation cost for direct service staff (per \$100 in wages paid)?
V. Holidays, Vacation, Sick Time, and Personal Days	
24	Are direct service staff eligible for holiday pay?
25	How many paid holidays are direct care service staff eligible to receive per year?
26	Are direct service staff eligible to receive paid time off (vacation), in addition to holidays?
27	How many paid time off (vacation) days are direct care service staff eligible to receive per year?
28	How many sick days are direct care service staff eligible to receive per year?
29	How many personal days are direct care service staff eligible to receive per year?

G – Additional Information

DRAFT South Dakota Provider Cost and Wage Survey In-Home Services South Dakota Department of Human Services, South Dakota Department of Social Services
Worksheet G: Additional Information
Instructions: Enter any clarifying comments in addition to the information covered in previous worksheets or sections. Please specify the data period for the additional information. If there is no additional information, please mark as "N/A" .
ADDITIONAL INFORMATION

Proposed Survey Timeline



Participation in the survey is an opportunity to provide critical information that will help inform the development and rebasing of rate setting methodologies and service rates.

Provider Survey Training and Assistance

During the provider survey reporting period, providers will have multiple sources available for assistance.

Initial Provider Training

- Live webinar training will be held August 9th
 - A link to the recorded training will be sent shortly after the webinar ends
- Guidehouse has provided detailed instructions within the survey
- Guidehouse will circulate responses to FAQs from stakeholders within a week following the training

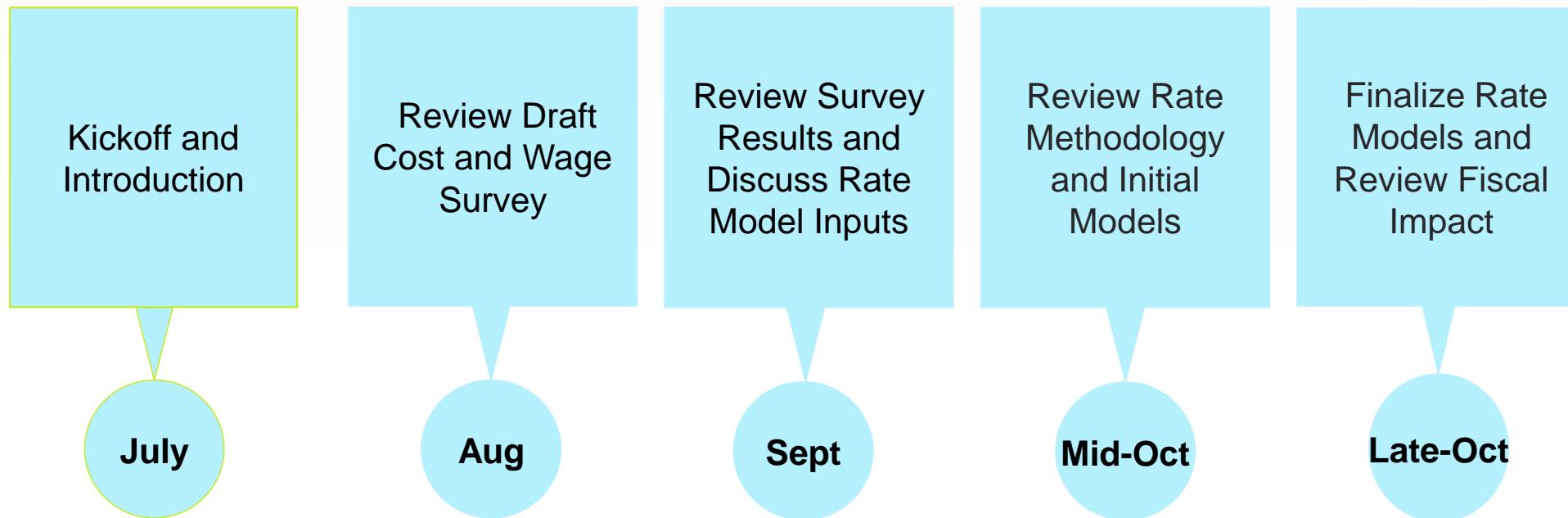
On-Demand Provider Support

- Guidehouse will provide ongoing technical assistance
 - A dedicated inbox (SD-In-Home-Rates@guidehouse.com) will be monitored for provider questions
 - Responses to inquiries will be sent within one business day

Advisory Workgroup Timelines and Next Steps

Proposed Rate Workgroup Meeting Plan

The Rate Workgroup and Guidehouse will meet once a month to discuss topics related to survey development and implementation, service review, as well as rate methodology and modeling requirements and results.



Upcoming Workgroups- Proposed Dates

- Workgroup #2:
 - September 13th (10am-1pm)
 - September 14th (10am-1pm)
- Workgroup #3
 - October 19th (10am-1pm)
 - October 20th (10am-1pm)

Questions and Answers